MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO. 10/ 5840 74
APPLICANT(S)

FILING DATE

(FOR USE WITH FORM PTO-875)

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PTO - 1360	(REV. 11/04)				433		<u> </u>		U	.S. DEPART	MENT of CO! demark Office	MMERCE	1808	